(6) Provision should be made for the Medical officers being given a course of training in the Ayurvedic system of treatment.

(7) Quack allopathic treatment, prevailing largely in Travancore, should be prevented altogether. The Durbar Physician should be invested with the power of bringing such men to book. The Presidencies of Bengal, Bombay and Madras had passed laws on the subject. A similar law should be passed in Travancore also.

(8) Itinerant dispensaries should be established, so that the people who were living in rural parts might be benefited.

(9) If the Government found it difficult to raise the Budget grant, the Member suggested the following measures to increase the allotment for medicines :—

(*a*) The department was overstaffed. For the expenditure of medicines worth Rs. 46,000 there was a staff absorbing Rs. 2,77,256 in the shape of pay. The Member proposed that the present staff might be reduced and their pay and designation modified, thereby saving about Rs. 36,000 yearly.

(*b*) Certain common and simple medicines could be prepared at the Trivandrum Medical stores, instead of importing them from foreign markets at prohibitive cost. That would save a considerable amount.

(*c*) Hill stations, such as Peermade and Devicolam, did not require highly paid Medical officers, who had to be given large sums in the shape of hill allowances. Hospital Assistants should be quite sufficient for such places.

Dewan's reply.—Noted.

106. Hardships experienced by the people of Vilavankode in the matter of medical relief.

Mr. N. Sankaranarayana Pillai (Member, Vilavankode taluk) said that the people of the taluk were subject to frequent attacks of malarial fever and other epidemic diseases, that there was no medical institution in the taluk and that the Government themselves had recognised that want and had deputed special medical officers to the taluk periodically. The repeated prayers of the people and the several representations made in the Assembly on the subject had not been so far favourably considered. The people were still persistent in their request and it was with their unanimous approval that the Member brought up the very same subject at the present session of the Assembly also. The people were generally agriculturists and were poor. They could not afford to go to distant places for medical aid and the result was that many premature deaths took place in the taluk. The Mission Hospital at Marthandam managed by Christian Evangelists did not fully meet all their requirements.

Regarding the Vydiasala at the place, the Member said that the physician was not a *qualified* man, although he received a grant of Rs. 10 every month.

Dewan.—Are you sure that the physician is not qualified ?

Member.—Yes, Sir. He has been getting the grant for the past 6 or 7 years.

Dewan.—How far is Parassala from Neyyattinkarai ?

Member.—6 miles. Kuzhithurai also is 6 miles from Parassala.

Regarding the hospital at Parassala, the Member said that the *post mortem* cases at Kuzhithurai were being held in the Parassala Hospital and that the Government were spending money on that account unnecessarily.

The Member, therefore, prayed that a Hospital or at least a dispensary be established in the centre of the taluk, or, if that was not practicable, that the Hospital at Parassala be shifted to Kuzhithurai.

Dewan's reply.—Noted.

107. The Kaniyar community and the Native system of medicine.

Mr. M. K. Padmanabha Kaniyar (Member, Nominated) said that by profession the Kaniyars were astrologers and native *Vydians* and that,

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